

POSITION	INITIALS	ID NO.	DATE
	<i>[Signature]</i>		09/19/01
FEE DETERMINATION		43	9/27/01
O.I.P.E. CLASSIFIER		1118	10-17-01
FORMALITY REVIEW	TH		
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

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Rejected
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Allowed
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(Through numeral)...
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Canceled
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Restricted
- N

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Non-elected
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Interference
- A

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Appeal
- O

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Objected

Claim		Date	
Final	Original		
1	✓	10/22/01	
2	✓		
3	✓		
4	0		
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6	✓		
7	✓		
8	✓		
9	✓		
10	✓		
11	0		
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Claim		Date	
Final	Original		
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Claim		Date	
Final	Original		
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